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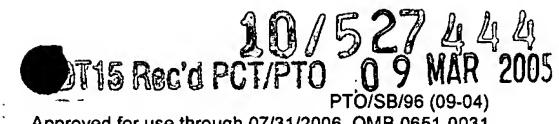
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Application Number	
Filing Date	
First Named Inventor	AROUSSI, Abdelwahab
Title	FLOW HOMOGENISER
Art Unit	
Examiner Name	
Attorney Docket Number	6817-A-1

I hereby revoke all p	revio	ous powers of attorney given in the al	oove-id	entified applic	cation.			
I hereby appoint:								
Practitioners associated with the Customer Number:				•				
OR								
✓ Practitioner(s) name	ed be	low:				•		
Name Registration Number					er			
C. Robert von Helle	ens		25,714					
William C. Cahill			19.742 (2)					
Marvin A. Glazer				20	8,801			
as my/our attorney(s) or a Trademark Office connect		s) to prosecute the application identified above erewith.	e, and to	transact all busir	ness in the	United States Patent and		
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Firm or Individual Name Cahill, von Hellens & Glazer P.L.C.								
Address	Address 155 Park One 2141 E. Highland Avenue							
City		Phoenix	State	Arizona		Zip 85016		
Country		USA	T Otato	ATIZOTIA		2.10 0.50 0		
Telephone	(602) 956-7000 Fax (602) 956-4298							
I am the:	·							
Applicant/Invento	or.					•		
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
SIGNATURE of Applicant or Assignee of Record								
Signature					Date			
Name					Telephone			
Title and Company GAIM Ltd								
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.								
*Total of		forms are submitted.						

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



Approved for use through 07/31/2006. OMB 0651-0031

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STATEMENT	UNDER 37 CFR 3.73(b)
Applicant/Patent Owner: GAIM Ltd	
Application No./Patent No.: filed herewith File	ed/Issue Date:
Entitled: FLOW HOMOGENISER	
	and the state of the control of the
(Name of Assignee)	<u>corporation incorporated in Great Britain</u> (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)
states that it is: 1. the assignee of the entire right, title, and interest; o	Γ
2. an assignee of less than the entire right, title and in The extent (by percentage) of its ownership interest	
in the patent application/patent identified above by virtue of	of either:
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Additional documents in the chain of title are liste	ed on a supplemental sheet.
	n of title are attached. nal assignment document(s)) must be submitted to Assignment assignment is to be recorded in the records of the USPTO. <u>See</u>
The undersigned (whose title is supplied below) is authorized	zed to act on behalf of the assignee.
Signature	Date
Printed or Typed Name	Telephone Number
Title	

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0 527444 APTO/SB/01 (09-04)

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Attorney Docket 6817-A-1 **DECLARATION FOR UTILITY OR** Number First Named Inventor **DESIGN** AROUSSI, Abdelwahab PATENT APPLICATION COMPLETE IF KNOWN (37 CFR 1.63) **Application Number** Filing Date Declaration Declaration Submitted after Initial OR Submitted **Art Unit** With Initial Filing (surcharge (37 CFR 1.16 (e)) Filing Examiner Name required). I hereby declare that: Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled: FLOW HOMOGENISER (Title of the Invention) the specification of which is attached hereto OR 09/09/2003 was filed on (MM/DD/YYYY) as United States Application Number or PCT International PCT/GB2003/003919 and was amended on (MM/DD/YYYY) Application Number (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed. **Prior Foreign Application** Foreign Filing Date **Priority Certified Copy Attached?** Country Number(s) (MM/DD/YYYY) Not YES <u>NO</u> 0220814.8 GB 09/09/2002 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

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Name	· -								
C. Robert von Hellens; Cahill, von H	ellens & Glazer F	P.L.C.							
Address 155 Park One 2141 E. Highland Avenue									
City			State	;			*	ZIP	
Phoenix			Arizon	Arizona				84016	
Country		Telephone		Fax					
USA		(602) 956-7000				(602)	956-429	8	
I hereby declare that all statem and belief are believed to be statements and the like so mad false statements may jeopardize	true; and furfle are punishab	ther that these stat ble by fine or impriso	ement onmen	s we	ere made both, unde	with 1 er 18 U	the kno	wledge that willful false	
NAME OF SOLE OR FIRST IN	VENTOR:	ПАр	etition	has l	been filed	for this	s unsigr	ed inventor	
Given Name (first and middle [if	any])				Family N				
Abdelwahab				Aroussi					
Inventor's Signature							•	Date	
Residence: City	State		Cour	Country Citize			Citizer	I nship	
Radford	Nottingham			UK GB			GB		
Mailing Address 17 Elmore Court									
City	State			Zip				Country	
Radford	Nottingham			NG7 4BE			ι	UK	
NAME OF SECOND INVENTO	R:			А	petition ha	as bee	n filed f	or this unsigned inventor	
Given Name (first and middle [if any]) Family Name					me or	Surnan	ne		
Faycal				Е	Bahri 				
Inventor's Signature								Date	
Residence: City	State			Country		Citizen		nship	
Chilwell	Nottingham		UK	UK		DZ			
Mailing Address 22 Charles Avenue									
City	State			Zip			Count	ту	
Chilwell	Nottingham			NG9 5EE UK			UK		
Additional inventors or a legal rep	presentative are bei	ing named on the 1 s	supplem	ental s	heet(s) PTO/	SB/02A	or 02LR a	attached hereto.	

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DECLARATION

ADDITIONAL INVENTOR(S)

DECLARATION		Supplemental Sheet Page 1 of 1						
Name of Additional Joint Inventor, if any	y:	A petitio	n has been filed for	this unsigned	l inventor			
Given Name (first and middle (if any)	Family Name or Surname							
Mohamed	Menacer Menacer							
Inventor's Signature				Date				
Radford Residence: City	Nottingham State	UH C	ountry	GB Citize	GB Citizenship			
42 Manston Mews								
Mailing Address	}	a	Υ					
Radford	Nottingham		NG7 3QY	UK				
City	State	·	Zip	Coun	try			
Name of Additional Joint Inventor, if any	y:	A petitio	n has been filed for	this unsigned	inventor			
Given Name (first and middle (if any))	Family Name or Surname						
Inventor's Signature				Date				
Residence: City	State		Country		Citizenship			
Mailing Address				_				
			•					
City	State		Zip	Coun	try			
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor								
Given Name (first and middle (if any))	Family Name or Surname							
Inventor's Signature				Date				
Residence: City	State		Country		Citizenship			
Mailing Address								
City	State		Zip	Coun	try			

City

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